

INDIANA PROFESSIONAL LICENSING AGENCY 302 WEST WASHINGTON STREET, ROOM E034 INDIANAPOLIS, IN 46204

NOTE: A/T/D for office use.

lame of sponsor					Date (month, day, year)				
1) NAME OF NEW DIRECTOR: [Include verification of degree (transcript) if applicable, and resume' indicating qualifications]								A/T/D	
2) INSTRUCTOR(S): (Attach an instructor application for a previously approved for you. Check the "PA" box for inst	all instructo	ors not pre	viously approved. Do not indi proved for another sponsor)	cate instructo	rs that have b	een			
INSTRUCTOR NAME(S)	PA	PA A/T/D INSTRUCTO			R NAME(S) PA			A/T/D	
course qualifies under in the Q box as follows: (1) Licens (5) Settlement procedures (6) Antitrust (7) Ethics and promanagement contracts (9) Timeshares, condos and coopproperty management (14) Commercial brokerage and affecting the real estate practice (19) Other.	ofessional os (10) Indu	standards ustrial brok	(8) Property management, ir erage and leasing (11) Invest	ncluding lease ment real esta	agreements, ate analysis (1	accour (2) App	nting pr raising	rocedures (13) Farn	
COURSE TITI	LE(S)			E-HOURS	M-HOURS	PA	Q	A/T/D	
4) Is the course(s) going to be offered in a real estate broke	er or sales	person offi	ce?	□ No					
COUNCIL COMMENTS:									
			SIGNED:						